

DRUGGED DRIVING CONFERENCE

March 4-6, 2019

Law Enforcement Administrative Facility (LEAF)



THE STANDARDIZED 12-STEPS & DRE EQUIPMENT

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The Standardized 12 Steps and DRE Equipment

The Three Determinations of a DRE

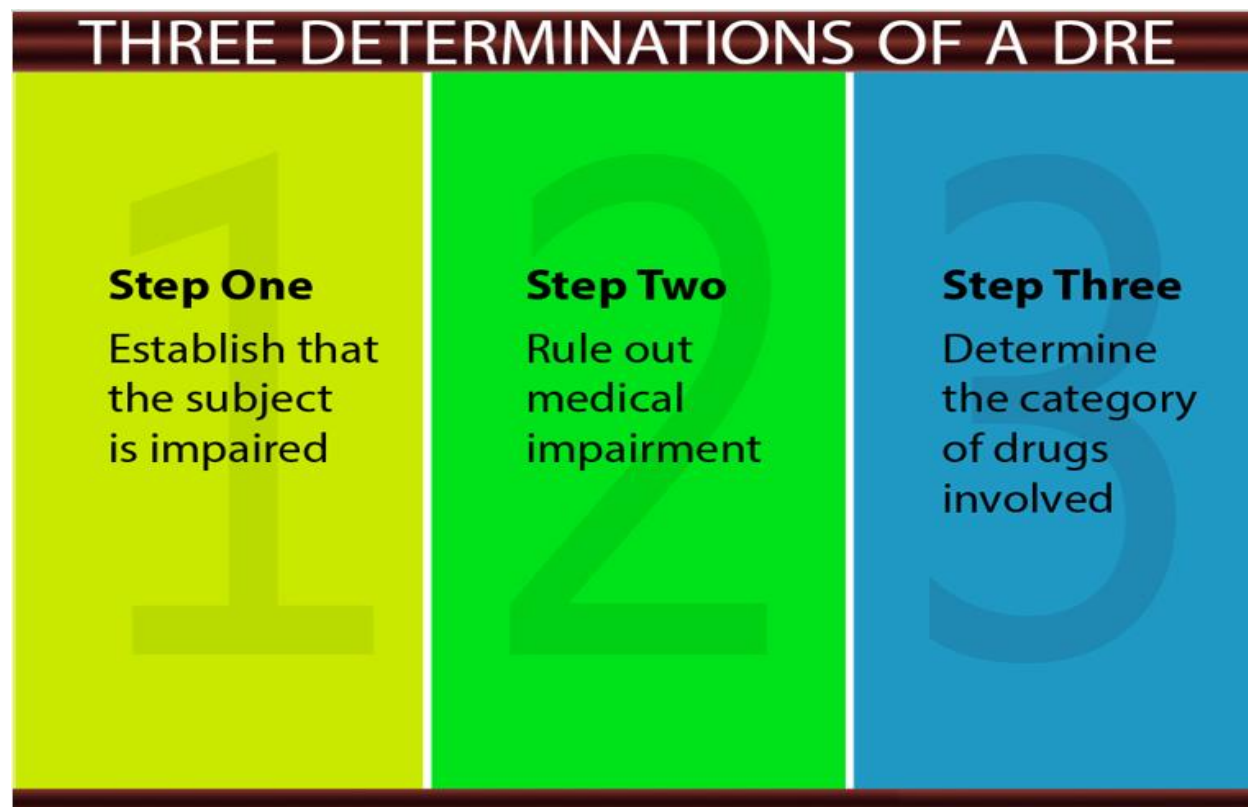
When conducting a DRE trial, it is important to remember that the DRE is not only looking for signs and symptoms of drug impairment. The DRE process is a three step process.

Step one: the DRE must determine whether the suspect is impaired.

Step two: if the DRE has established that the suspect is impaired, the DRE must determine whether the impairment is caused by drugs or by a medical or mental health issue. This is commonly referred to as the medical rule out. If needed, the DRE will get the suspect medical assistance.

Step three: if it is established that the impairment is caused by drugs, the DRE then determines which category or categories of drugs is causing the impairment. The DRE uses the standardized 12 step process to do this.

When prosecuting a DRE case, the prosecutor should have the DRE officer testify to this three step process, emphasizing that DRE officers do not just assume the suspect is impaired by drugs.



The Standardized 12 Steps



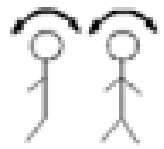

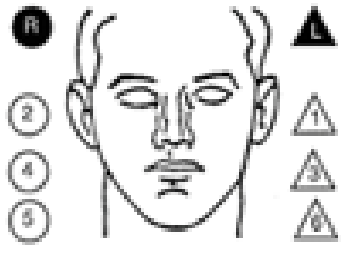








DRUG EVALUATION CLASSIFICATION PROGRAM

- ___ 1 **BREATH ALCOHOL TEST**
Note instrument, serial number and result.
- ___ 2. **INTERVIEW OF ARRESTING OFFICER**
Include reason for stop, driving observations, general observations, paraphernalia, drug related street terms used by the subject. (Gloves must be worn from this point.)
- ___ 3. **PRELIMINARY EXAMINATION (FIRST PULSE)**
Health questions, observe face, breath and speech.
- ___ 4. **EYE EXAMINATIONS**
HGN, VGN, LOC
- ___ 5. **DIVIDED ATTENTION TESTS**
 Modified Romberg Balance
 Walk and Turn
 One Leg Stand
 Finger to Nose
- ___ 6. **VITAL SIGNS (SECOND PULSE)**
- ___ 7 **DARK ROOM EXAMINATION & SIGNS OF INGESTION**
After pupil measurements, check nasal & oral cavities.
- ___ 8 **CHECK FOR MUSCLE RIGIDITY**
- ___ 9 **CHECK FOR INJECTION SITES (THIRD PULSE)**
- ___ 10. **INTERROGATION, STATEMENTS & OTHER OBSERVATIONS**
- ___ 11. **OPINION OF EVALUATOR**
- ___ 12. **TOXICOLOGICAL EXAMINATION**

This list/document can be used as a demonstrative aide during trial.

The DRE Face Sheet

DRUG INFLUENCE EVALUATION						Submit	
Evaluator		Date #		Routing Log #		Case #	
Recorder / Witness		Crash <input type="checkbox"/> None <input type="checkbox"/> Injury <input type="checkbox"/> Property <input type="checkbox"/> Fatal <input type="checkbox"/>		Arresting Officer (Name, ID#)			
Suspect's Name (Last, First, Middle)		Date of Birth		Sex		Race	
Date Examined / Time / Location		Breath Results		Test Refused <input type="checkbox"/>		Chemical Test <input type="checkbox"/> Urine <input type="checkbox"/> Blood <input type="checkbox"/>	
Mirrors Wearing Given <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>		What have you eaten today? When?		What have you been drinking? How much?		Time of last drink?	
Time now / Actual		When did you last sleep? How long?		Are you sick or injured? <input type="checkbox"/> Yes <input type="checkbox"/> No		Are you diabetic or epileptic? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Do you take insulin? <input type="checkbox"/> Yes <input type="checkbox"/> No		Do you have any physical defects? <input type="checkbox"/> Yes <input type="checkbox"/> No		Are you under the care of a doctor or dentist? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Are you taking any medication or drugs? <input type="checkbox"/> Yes <input type="checkbox"/> No		Attitude: Cooperative				Coordination: Poor	
Speech: Normal		Breath: Odor: Normal		Face: Normal			
Corrective Lenses <input type="checkbox"/> None <input type="checkbox"/> Glasses <input type="checkbox"/> Contacts, if so <input type="checkbox"/> Hard <input type="checkbox"/> Soft		Eyes <input type="checkbox"/> Reddened Conjunctiva <input type="checkbox"/> Normal <input type="checkbox"/> Bloodshot <input type="checkbox"/> Watery		Blindness <input type="checkbox"/> None <input type="checkbox"/> Left <input type="checkbox"/> Right		Tracking <input type="checkbox"/> Equal <input type="checkbox"/> Unequal	
Pupil Size <input type="checkbox"/> Equal <input type="checkbox"/> Unequal (explain)		Vertical Nystagmus <input type="checkbox"/> Yes <input type="checkbox"/> No		Able to follow stimulus <input type="checkbox"/> Yes <input type="checkbox"/> No		Eyelids <input type="checkbox"/> Normal <input type="checkbox"/> Droopy	
Pulse and time 1. ____ / ____ 2. ____ / ____ 3. ____ / ____		HGN Lack of Smooth Pursuit Maximum Deviation Angle of Onset		Right Eye Left Eye Convergence 		Left Count Right Count One Leg Stand 	
Modified Romberg Balance 		Walk and Turn Test 		Cannot keep balance: _____ Starts too soon _____ Stops walking _____ Misses heel-toe _____ Steps off line _____ Raises arms _____ Actual steps taken _____		L R <input type="checkbox"/> <input type="checkbox"/> Sways while balancing <input type="checkbox"/> <input type="checkbox"/> Uses arms to balance <input type="checkbox"/> <input type="checkbox"/> Hops <input type="checkbox"/> <input type="checkbox"/> Puts foot down	
Interval clock, estimated at 30 seconds		Describe Turn		Cannot do test (explain)		Type of footwear:	
 <p>Finger to Nose (Draw lines to spots touched)</p>		PUPIL SIZE		Room Light 2.5-5.0		Darkness 5.0-9.5	
		Left Eye					
		Right Eye					
		Rebound Duration <input type="checkbox"/> Yes <input type="checkbox"/> No		Pupillary Unrest <input type="checkbox"/> Yes <input type="checkbox"/> No		Reaction to Light Normal	
<p>Blood pressure ____ / ____</p> <p>Temperature ____ °</p> <p>Muscle tone <input type="checkbox"/> Normal <input type="checkbox"/> Flaccid <input type="checkbox"/> Rigid</p> <p>Comments: _____</p>		RIGHT ARM		LEFT ARM			
							
							
							
What drugs or medications have you been using?		How much?		Time of use?		Where were the drugs used? (Location)	
Date / Time of arrest		Time DRE was notified		Evaluation start time		Evaluation completion time	
Officer's Signature		DRE #		Reviewed/approved by? Date:			
Opinion of Evaluator:		<input type="checkbox"/> Not Impaired <input type="checkbox"/> Medical		<input type="checkbox"/> Alcohol <input type="checkbox"/> CNS Depressant		<input type="checkbox"/> CNS Stimulant <input type="checkbox"/> Hallucinogen	
				<input type="checkbox"/> Dissociative Anesthetic <input type="checkbox"/> Narcotic Analgesic		<input type="checkbox"/> Inhalant <input type="checkbox"/> Cannabis	

The Tools of the Trade: DRE Equipment

The DRE equipment can make useful demonstrative aides during the trial. This is often a good way to break up a long trial.

The DRE uses the following equipment in conducting a drug influence evaluation:

- **Pupilometer:** a small, approximately 3 inch by 5 inch card (approximately 7 to 12 cm), that is usually plastic, that displays dark circles ranging in half-millimeter gradations from 1.0 millimeters to 9.0 millimeters.

The DRE matrix is often included on the card.

INDICATORS CONSISTANT WITH DRUG CATEGORIES							
MAJOR INDICATORS	COCAINE PRESENT	COCAINE ABSENT	HEROIN PRESENT	HEROIN ABSENT	BARBITURATES PRESENT	BARBITURATES ABSENT	UNKNOWN
HORIZONTAL NYCTALUS	PRESENT	NONE	NONE	PRESENT	NONE	PRESENT	NONE
VERTICAL NYCTALUS	PRESENT (HIGH DOSE)*	NONE	NONE	PRESENT	NONE	PRESENT (HIGH DOSE)*	NONE
LACK OF CONJUGENCE	PRESENT	NONE	NONE	PRESENT	NONE	PRESENT	PRESENT
PUPIL SIZE	NORMAL (S)	DILATED	DILATED	NORMAL	CONST. PUPILS	NORMAL (S)	DILATED (S)
REACTION TO LIGHT	SLOW	SLOW	NORMAL (S)	NORMAL	UPPER OR NONE POSSIBLE	SLOW	NORMAL
PULSE RATE	DOWN (S)	UP	UP	UP	DOWN	UP	UP
BLOOD PRESSURE	DOWN	UP	UP	UP	DOWN	UP (LOW) (S)	UP
SKIN TEMPERATURE	NORMAL	UP	UP	UP	DOWN	UP (LOW) (S)	NORMAL

*High dose for that particular individual

- **Sphygmomanometer:** a manual, aneroid blood pressure cuff consisting of a pumping bulb, a screw valve, an analog gauge, and a bladder.



- **Stethoscope:** a single or double diaphragm, double tubed



- **Thermometer:** oral, digital, with disposable covers



- **Penlight:** low power, medical style



NOTE: at times, the DRE officer will use a **UV light** instead of a penlight during the darkroom examination – especially if the suspect has very dark eyes. This is allowed by the DEC protocol.



- **Magnifying light:** generally five to ten magnification power, similar to those used by stamp collectors and model builders



- **Stimulus:** to conduct eye movement examinations



- Evidence containers: for blood or urine



- Protective gloves



In addition, DREs may utilize a camera to take photos of injection marks, nasal and oral cavities, the eyes and other evidence. DREs may also utilize various types of breath testing equipment, including preliminary breath testing instruments (PBTs).

